

Ship Aug 22

Work Order ID 123589

Wednesday, August 13, 2014 1:44:23 PM

846.3719

123589

Page 1

Item ID: 646.3719

B 123589

Accept

N900040100

Setup Start *NS1*

Revision ID:

REV-A

Stop *NS2*

Item Name: Doubler

Start Date: 8/14/14 Start Qty: 20.00

20
20 28

Cust Item ID:

Required Date: 8/20/14 Req'd Qty: 20.00

Customer:

Reference:

Approvals:

Process Plan: 

Date: 14-8-13

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
646.3700	A								

110

0.00

110

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg

Dwg Rev: A

Prog Rev: A

2-Deburr if necessary

22 0 DAS 23 9-89 14-08-13

120

QC2- Inspect parts off machine FAI/FAIB

0.00

120

QC

Memo

0.00

Quality Control

22 0 DAS 23 9-89 14-08-13

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 123589

Wednesday, August 13, 2014 1:44:23 PM

123589

Page 2

Item ID: 646.3719 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Doubler
Start Date: 8/14/14 Start Qty: 20.00 ***20*** Cust Item ID:
Required Date: 8/20/14 Req'd Qty: 20.00 ***20*** Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	QC8- Inspect parts - second check	0.00							
130						(22)			DAS
QC	Memo	0.00							38 14/08/14
Quality Control									9-89
140	Outsource process-Anodize per QSI017 4.1.10.1	0.00							
140									
Outsource4	Memo	0.00							
Outsource process - Anodize	Issue P/O to ATG : <u>25410</u>								
	1- Black Anodize as per Dwg 646.3700								
	2- PRIME AS PER DWG, SEE NOTE #2								
	Certification of Comformity is required								
150	Receive & Inspect for Damage & Mat'l Certs	0.00							
150									
Packaging	Memo	0.00							
Packaging									

CA 14/08/21 22

22x SP14-8-21

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 123589

Wednesday, August 13, 2014 1:44:23 PM

123589

Page 3

Item ID: 646.3719 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Doubler
Start Date: 8/14/14 Start Qty: 20.00 ***20*** Cust Item ID:
Required Date: 8/20/14 Req'd Qty: 20.00 ***20*** Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160	QC Inspect part completeness to step on W/O	0.00							
160	QC					22		10	DAS 38 9-89 14-8-21
QC	Memo	0.00							
Quality Control									
190	Identify as per dwg & Stock Location: <u>CCK103</u>	0.00							
190						22X			DAS 28 9-89 AUG 22 2014
Packaging	Memo	0.00							
Packaging	***IDENTIFY AS PER APICAL MPP-120 BY STAMPING THE P# AND REV***								
200	QC21- Final Inspection - Work Order Release	0.00							
200									
QC	Memo	0.00							
Quality Control									

MCJ 14-08-22
ME
14-8-20

DQA: _____ Date: _____

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

Wednesday, August 13, 2014 1:44:27 PM

Page 1

Work Order ID: 123589

123589

Parent Item: 646.3719

646 3719

Parent Item Name: Doubler

Start Date: 8/14/14

Required Date: 8/20/14

Start Qty: 20.00

Required Qty: 20.00

Comments: IPP REV:A 12.10.22 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

M6061T6S.063

Purchased

No

110

sf

835.0880

0.02778

1

DAS

23

9-89

14-08-13

M6061T6S 063

**

6061-T6 .063 Sheet

Location

Loc Qty

Loc Code

MAT021

583.088

M127420

111.12

M128054

63.468

M128941

28

M129636

183

M129845

80.5

M129881

117

TPI

252

M129637

252

129845

DQA: _____ Date: _____

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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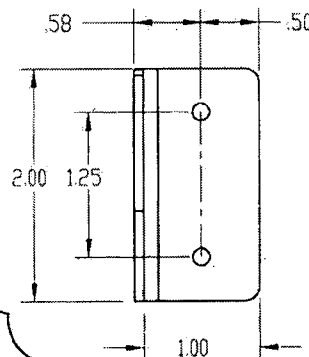
APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE NO. 03702				SHEET 1 OF 2	
	DWG NO. 646.3700	REV: A	PREPARED BY B. PETERS	DATE: 11/15/12	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.	
	DWG TITLE: SHEETMETAL					
	APPROVED BY: ENGR. <i>[Signature]</i>	MFG. <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: NEXT ORDER		
TRANSACTION CODES (TC) A-ADD C-CREATE R-REVISE D-DELETE	REASON: ADDED ALTERNATE MATERIAL AND REVISED REFERENCE DIMENSIONS				EOR: D-12-010	

SHEET 1, ZONE A2 IS:

IS

△ PRIMARY MATERIAL: ALUMINUM 6061-T6 PER AMS-QQ-A-250/11
ALTERNATE MATERIAL: SS 17-4 PH PER AMS 5604

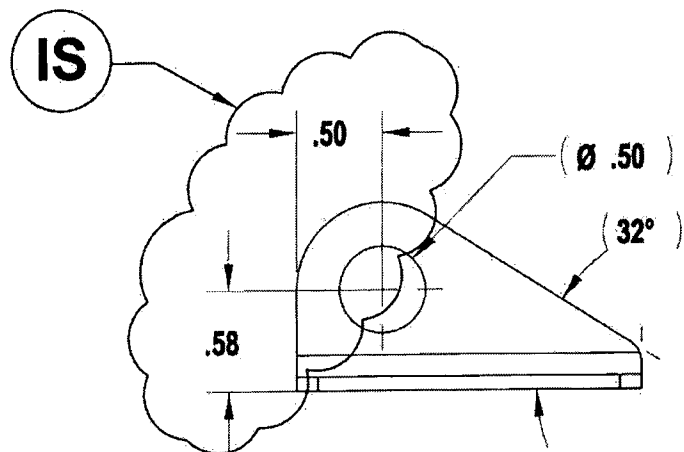
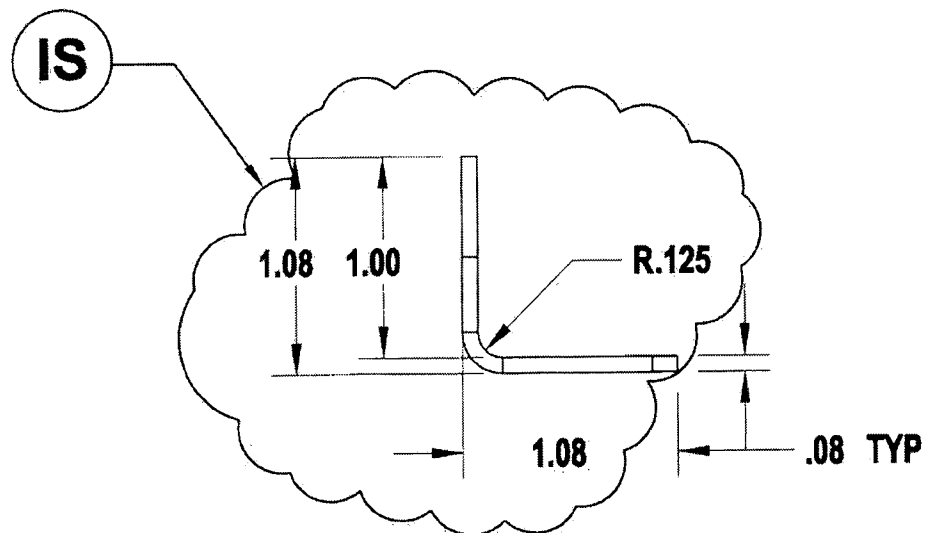
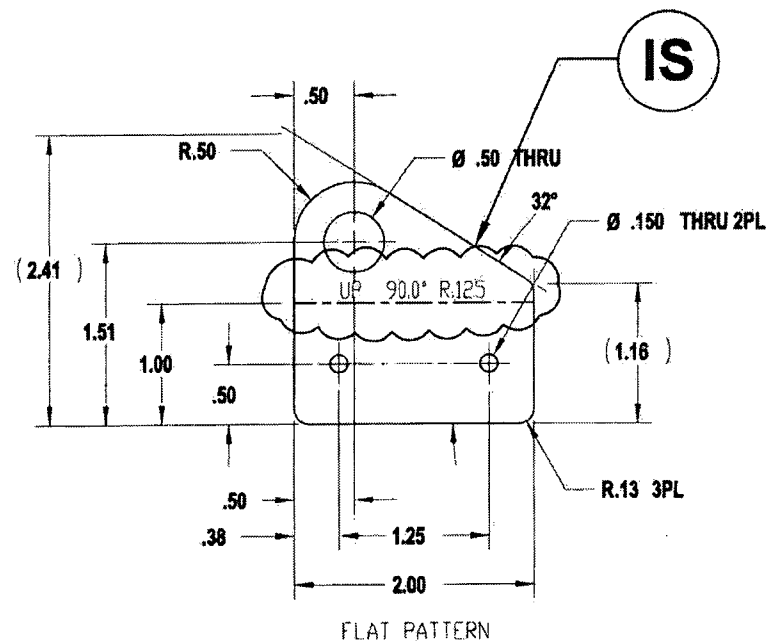
IS



SHEET 7, ZONE B1 IS:

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 123589 MP
14-8-13

F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL	SPECIFICATION
DOCUMENTS EFFECTED:					CHANGE CATEGORY	DER REVIEW REQUIRED
<input type="checkbox"/> RFMS <input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> ICA <input type="checkbox"/> BOM					<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

**SHEET 7, ZONE C4 IS:****SHEET 7, ZONE D1 IS:****SHEET 7, ZONE B7 IS:**

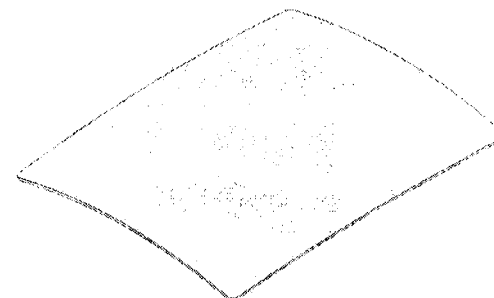
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
-----	----	-------------	-----	-------------	------------------------

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REV.	DESCRIPTION	DATE	APPROVED
A	UNINCORPORATED ECN(S)	03/02/92	RECEIVED

NOTES:

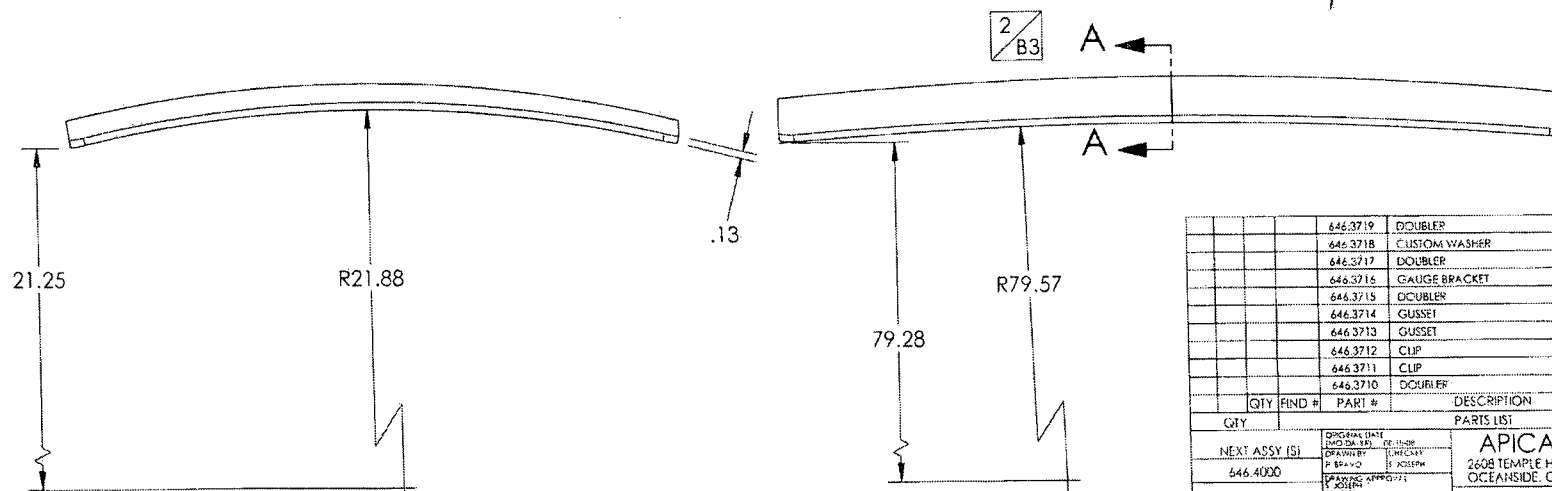
- 1 MATERIAL: ALUMINUM 6061-T6 PER AMS-QQ-A-250/11
- 2 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER PRIME IAW MIL-P-23377J TYPE I CLASS N
- 3 MATERIAL: 17-4 PH AMS 5604, CONDITION H900
- 4 FINISH: PRIME IAW MIL-P-23377J TYPE I CLASS N
5. DEBURR AND BREAK ALL SHARP EDGES
6. IDENTIFY IAW MPP-120



646.3710

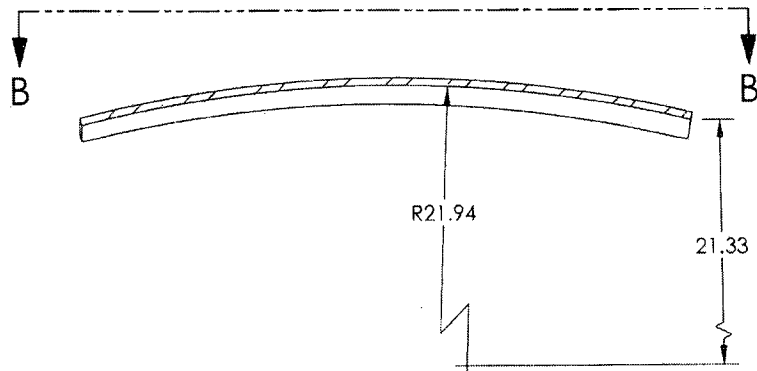
UNINCORPORATED ECN(s)

03702



		646.3719	DOUBLER	▲	▲	
		646.3718	CUSTOM WASHER	▲	▲	
		646.3717	DOUBLER	▲	▲	
		646.3716	GAUGE BRACKET	▲	▲	
		646.3715	DOUBLER	▲	▲	
		646.3714	GUSSET	▲	▲	
		646.3713	GUSSET	▲	▲	
		646.3712	CLIP	▲	▲	
		646.3711	CLIP	▲	▲	
		646.3710	DOUBLER	▲	▲	
	QTY	FIND #	PART #	DESCRIPTION	MATL	SPEC
QTY			PARTS LIST			
NEXT ASSY IS:			APICAL INDUSTRIES			
646.4000			2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA 92056-3512 (760)724-5300			
			SHEETMETAL			
			SCALE NONE			
			SHEET 1 OF 9			

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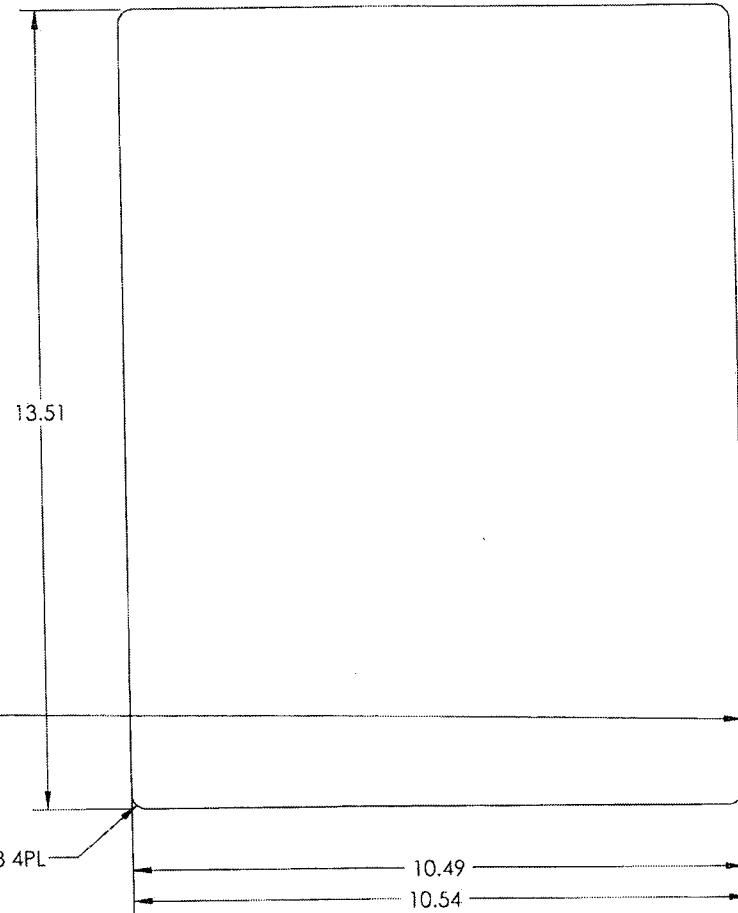


SECTION A-A



R395.138

R.13 4PL

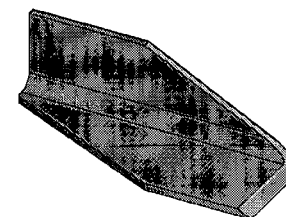
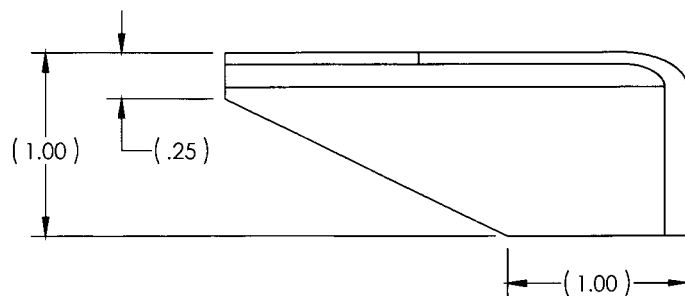


SECTION B-B

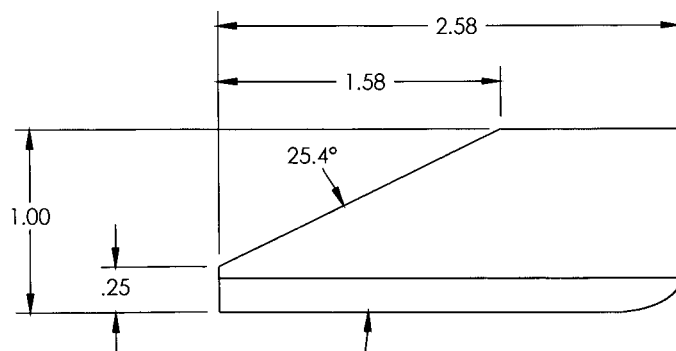
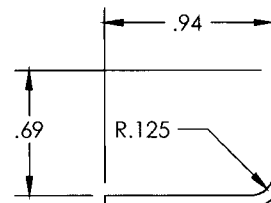
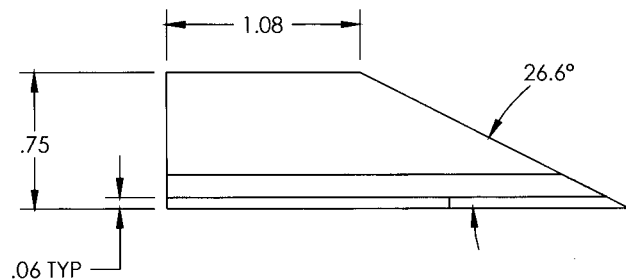
ORIGINAL DATE JAN 08 10 18 08		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWN BY P. MAYO	CHECKED J. JOSEPH		
DESIGNED APPROVAL J. JOSEPH		SHEETMETAL	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE FINISH DIMENSIONS ±.01 HOLE DIMENSIONS ±.005 ANGLES 1:3		REV B 07/16	REV A
SCALE NONE		SHEET 2 OF 9	

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



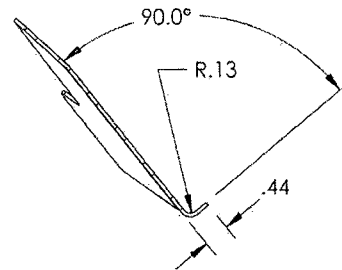
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646.3712 OPPOSITE



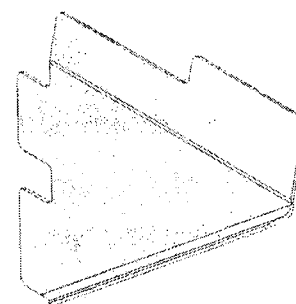
NEXT ASSY (S)	ORIGINAL DATE 08-18-08	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300 SHEETMETAL	
	DRAWN BY P. BRAVO		
	CHECKER S. JOSEPH		
	DRAWING APPROVAL S. JOSEPH 08-18-08		
CONTRACT NO.		SHEETMETAL	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 2 PLACE DECIMALS ±.01 3 PLACE DECIMALS ±.005 ANGLES ±.5°		SHEETMETAL	REV. A
SCALE: NONE		DWG. NO. 646.3700	SHEET 3 OF 9

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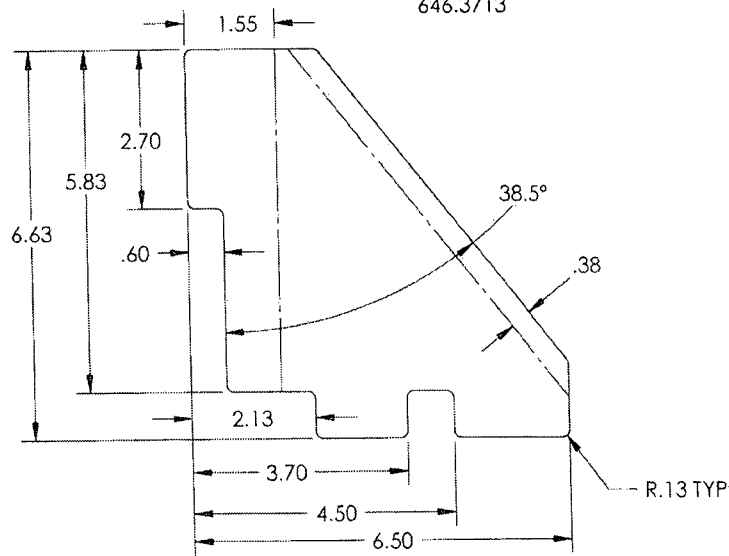
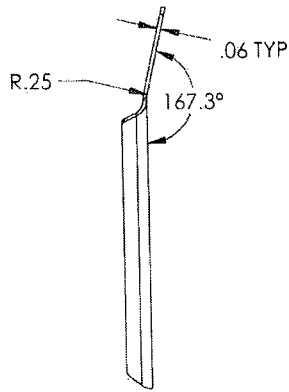
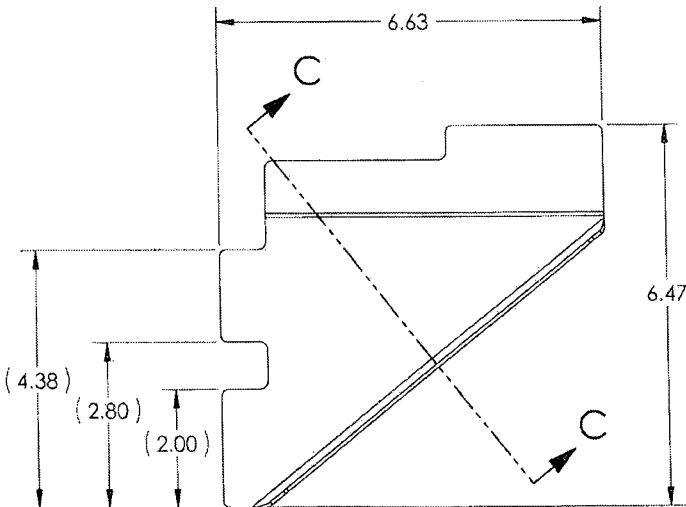
REVISIONS			
REV	DESCRIPTION	DATE	AUTHORIZED



SECTION C-C



646.3713

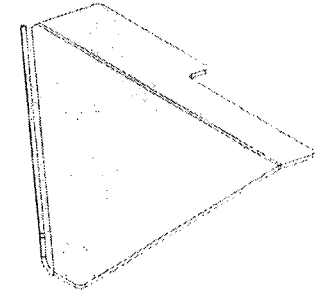
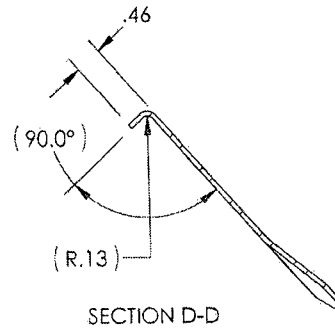
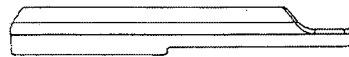


FLAT PATTERN

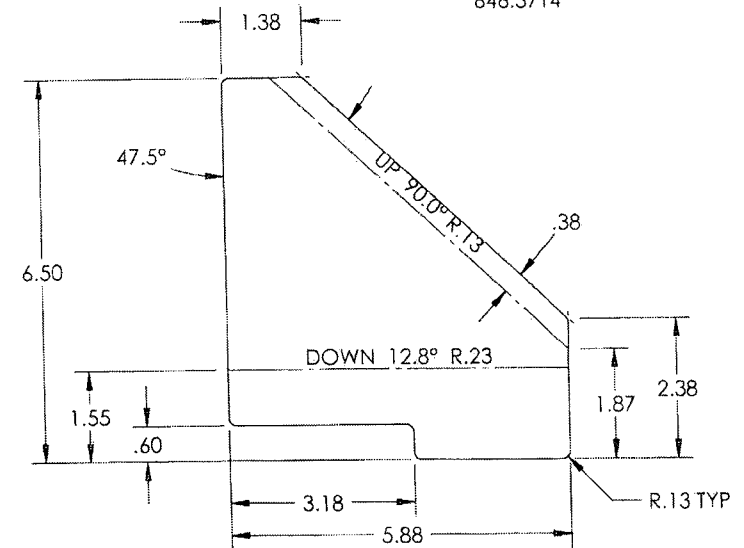
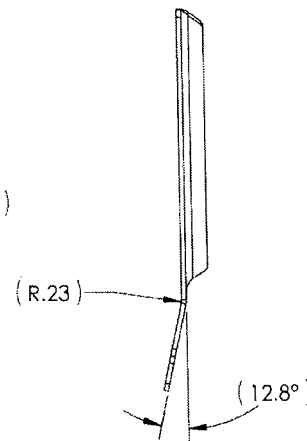
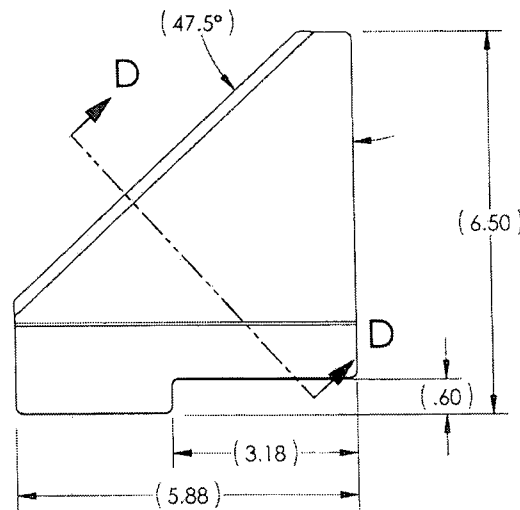
NEXT ASSY (S)	ORIGINAL DATE (JAN-17)	08-18-08	APICAL INDUSTRIES 2609 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300		
	DESIGNED BY STREETER				
	DATE 12-20-07				
	APPROVED BY JOHN				
DRAWING APPROVAL			SHEETMETAL		
CONTRACT NO.					
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES FRACTIONS ARE 3 PLACES DECIMALS 1/1000 ANGLES 1/2			SEE CAGE CODE 8 07M26	DWG NO 646.3700	REV A
			SCALE: NONE		SHEET 1 OF 1

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REVISION		DATE	APPROVED
REV	DESCRIPTION		



646.3714

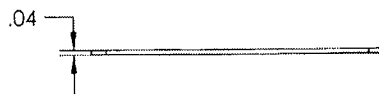
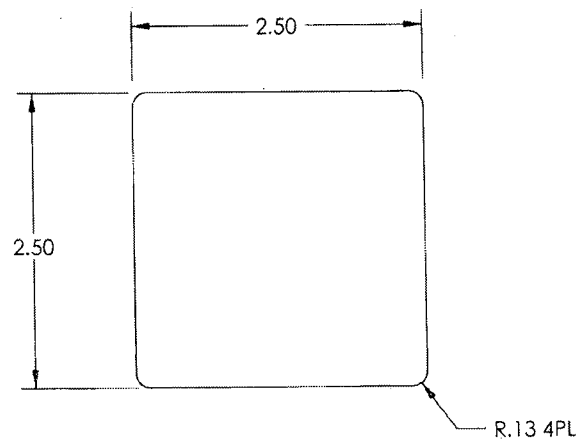


FLAT PATTERN

QUOTE DATE: 11/20/08 QUOTE BY: CHESTER P. BY: J.C. KOPPEL DRAWING APPROVAL: J. KOPEL DATE: 11/20/08 CHECKED BY: J. KOPEL		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FINISH DIMENSIONS ± .01 FINISH DIMENSIONS ± .005 ANGLES ± .2°		SHEETMETAL 646.3700	SHEET 5 OF 9

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REVISION			
REV.	DESCRIPTION	DATE	APPROVED

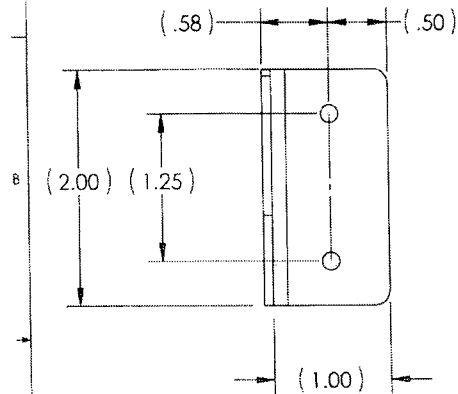


646.3715

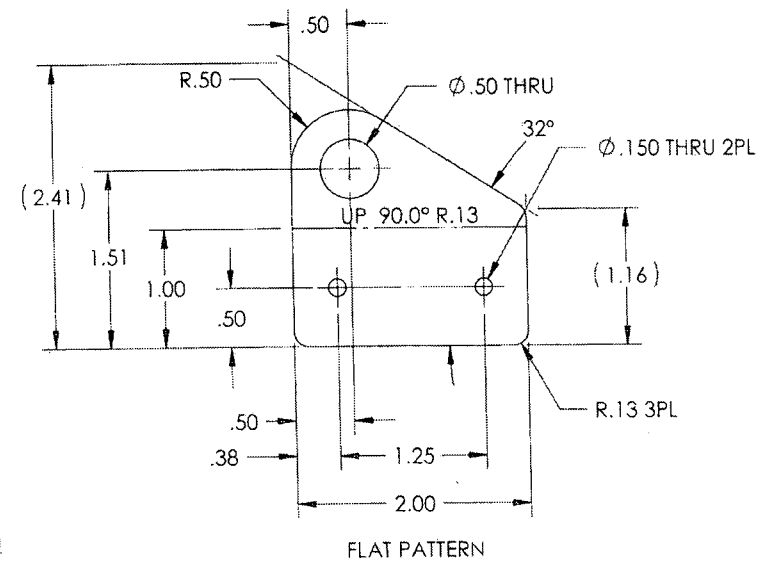
NEXT ASSY (S)	ORIGINAL DATE	08-18-03	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
	DESIGNED BY	C. JOSEPH		
	DRAWN BY	P. BRAYO	SHEETMETAL	
	DRAWING APPROVAL	J. JOSEPH		
	DATE	08-18-03	SHEETMETAL	
	CONTRACT NO.			
	UNLESS OTHERWISE SPECIFIED		SUP. CAGE CODE	646.3700
	DIMENSIONS ARE IN INCHES		REV	A
	TOLERANCES ARE:			
	2 PLACE DECIMALS ±.01			
	3 PLACE DECIMALS ±.005			
	ANGLES ±.5°			
	SCALE: NONE		SHEET 6 OF 9	

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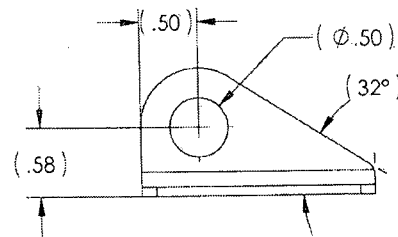
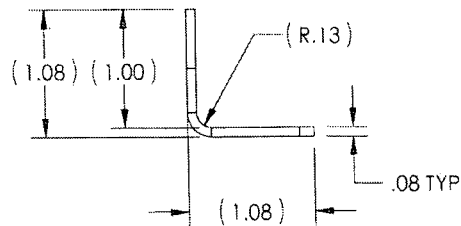
REV		DESCRIPTION	DATE	APPROVED



646.3716



FLAT PATTERN

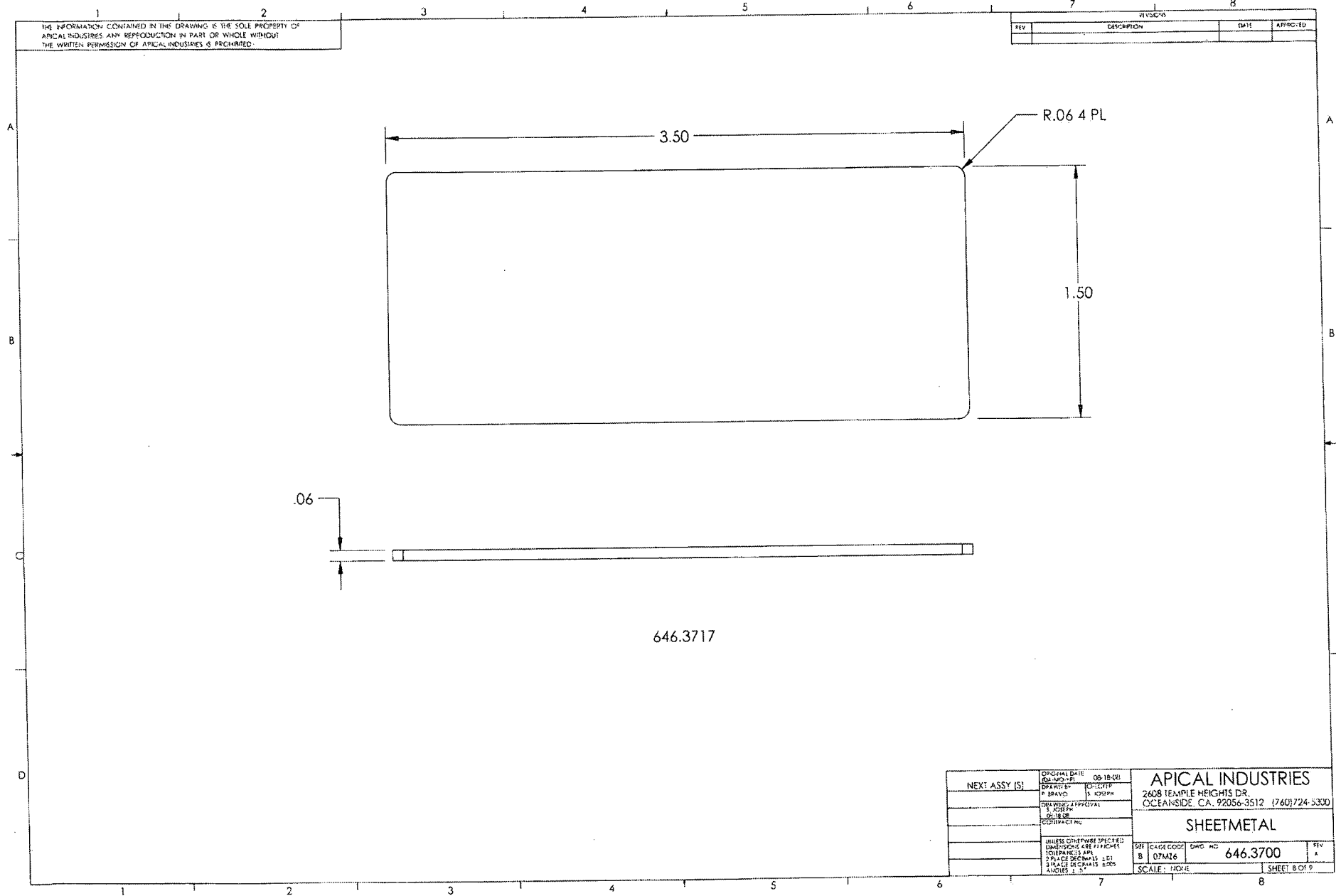


NEXT ASSY (S)	ORIGINAL DATE	08-18-01	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
	DRAWN BY	EMILY		
	DESIGNED BY	EMILY		
	DATE	08-18-01		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ± .01 ANGLES ± .5°	DATE	08-18-01	SHEETMETAL 646.3700	
	SCALE	AS SHOWN		
	DATE	08-18-01		
	SCALE	AS SHOWN		

SHEET 2 OF 9

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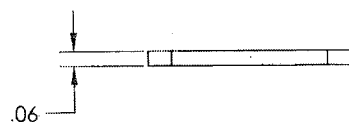
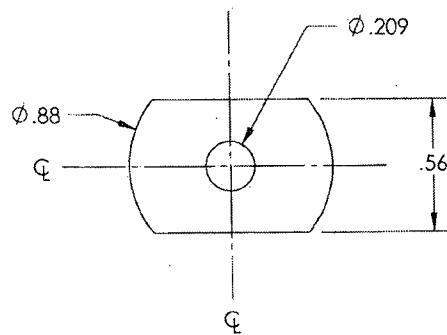
REVISIONS			
REV	DESCRIPTION	DATE	APPROVED



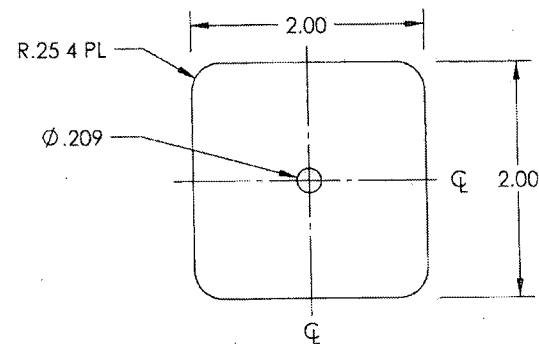
NEXT ASSY (S)	ORIGINAL DATE 08-18-06	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
	DESIGNED BY P. BRAYNO		
	CHECKED BY S. JOSEPH	SHEETMETAL	
	DATE 08-18-06		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ±.01 ANGLES ± .5°	SHEET CODE B	DWG NO. 646.3700	REV A
	SCALE: 1"=1'-0"		SHEET 8 OF 9

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



646.3718



646.3719

NEXT ASSY (S)	ORIGINAL DATE	08-18-08	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
	DESIGNED BY	S. JOSEPH		
	DRAWING APPROVAL	S. JOSEPH	SHEETMETAL	
	DATE	08-18-08		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1 PLACE DECIMAL = .01 2 PLACE DECIMAL = .005 ANGLES ± .5°			SHEET	8
SCALE: NONE			LAST CODE	07M26
			DWG NO	646.3700
			PIN	A
			SHEET 5 OF 5	



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO25410**

Purchase Order Date 8/18/2014

PO Print Date 8/18/2014

Page Number 1 of 2

Order From :

VC-ATG001

Ship To : DART AEROSPACE LTD

A.T.G. INDUSTRIES INC.
731 INDUSTRIELLE ROAD
ROCKLAND, ON K4K 1T2
CANADA

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Contact Name

Vendor Phone

613-446-4544

Buyer

Michael Gregoire

Customer POID

Customer Tax #

10127-2607

Terms

Net 30

Currency

CAD

FOB

FCA - (Free Carrier)

Ship To Contact

Ship To Phone

Ship Via:

VENDOR'S TRUCK

Ship Acct:

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extend Pr
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1	123589	646.3719 Doubler	8/18/2014 No 8/20/2014		22.00	\$6.00	\$132.
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FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N
B123589

Line Total: \$132.

2	123020	646.3810 Bracket	8/18/2014 No 8/20/2014		16.00	\$6.00	\$96.
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FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N
B123020

Line Total: \$96.

3	123148	646.3610 Filler	8/18/2014 No 8/20/2014		4.00	\$6.00	\$24.
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FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N
B123148

Note:

8/18/2014

8/14/8-24



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada

Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 63215

Date: 20-Aug-14

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description	Rev:	
22 ea	Part: 646.3719 DOUBLER HARD ANODIZE AS PER MIL-A-8625 TY II, CLASS 2 PRIME AS PER MIL-P-23377J TYPE I CLASS N PRIMER IS SUPPLY BY THE CUSTOMER Job: 20140522 PO: PO25410		SP 14-8-21
16 ea	Part: 646.3810 HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2 PRIME MIL-P-23377J TYPE I CLASS N Job: 20140523 PO: PO25410		
4 ea	Part: 646.3610 FILLER HARD ANODIZE AS PER MIL-A-8625 TY II, CLASS 2 PRIME AS PER MIL-P-23377J TYPE I CLASS N PRIMER IS SUPPLY BY THE CUSTOMER Job: 20140524 PO: PO25410		
30 ea	Part: 646.3717 DOUBLER HARD ANODIZE AS PER MIL-A-8625 TY II, CLASS 2 PRIME AS PER MIL-P-23377J TYPE I CLASS N PRIMER IS SUPPLY BY THE CUSTOMER Job: 20140525 PO: PO25410		
Certificate of Conformance			
A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.			
ISO 9001 : 2008 REGISTERED			